

PATRICIA PARHAM

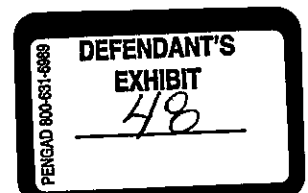
From: PATRICIA PARHAM
Sent: Thursday, August 30, 2012 3:14 PM
To: 'bianca.barnes@uhhospitals.org'
Subject: Zili Zhang
Attachments: How to UNZIP.html; SecureZIP Attachments.zip

Bianca,

I am credentialing the application for Dr. Zhang and just left a message for you. Please call me back just to verify Dr. Zhang can be reached at the correspondence number I called. Thanks in advance. Once I get that call, I can continue processing the application.

For applications in process: to expedite the processing please remember to include your reference number on all communications to CGS

Patricia Parham
Provider Enrollment Sr. Analyst
615-660-5258 External
Internal ext 2445258
Patricia.parham@cgsadmin.com
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Personal Items

Page 1 of 2

From: bronxvikki <bronxvikki@aol.com>
 To: Christina.Morrison <Christina.Morrison@UHhospitals.org>
 Subject: Fwd: Personal Items
 Date: Thu, Aug 2, 2012 2:13 pm

Please respond.

Sent from my HTC smartphone on the Now Network from Sprint!

----- Forwarded message -----

From: "Johnson, Sheryl L" <sheryl.johnson@UHhospitals.org>
 To: <bronxvikki@aol.com>
 Subject: Personal Items
 Date: Thu, Aug 2, 2012 9:15 am

Victoria -- I have forwarded your request to HR and they will be in touch with you.

Sheryl Johnson

Provider Services Manager

UHPS

24701 Euclid Avenue

Euclid, OH 44117

PH: 216-692-1144

FX: 216-383-6745

From: bronxvikki@aol.com [mailto:bronxvikki@aol.com]
 Sent: Thursday, August 02, 2012 1:02 AM
 To: Johnson, Sheryl L
 Subject: Personal Items

Sheryl,

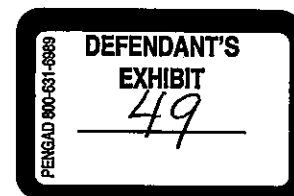
I will be sending my friend to pick up some of my personal belongings today, such as my calendars that are in my desk and my notepads.

Please place these items in an sealed envelope and leave them at the front desk with Wanda..

Sent from my HTC smartphone on the Now Network from Sprint!

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VJ000204

~~Personal Items~~

any responsibility for unauthorized disclosure of this information to anyone other than the addressee.

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Re: FMLA - 7/27/2012

Page 1 of 2

From: bronxvikki <bronxvikki@aol.com>
To: Lisa.Edgehouse <Lisa.Edgehouse@UHhospitals.org>
Subject: Re: FMLA - 7/27/2012
Date: Fri, Aug 3, 2012 1:12 pm

Thanks.

Sent from my HTC smartphone on the Now Network from Sprint!

----- Reply message -----
From: "Edgehouse, Lisa" <Lisa.Edgehouse@UHhospitals.org>
To: <bronxvikki@aol.com>
Subject: FMLA - 7/27/2012
Date: Fri, Aug 3, 2012 1:07 pm

Will do, and consider it done.

Lisa Edgehouse RN
Care Advocate
UH Corporate Health
Phone: 216-844-8583
Confidential fax: 216-201-4096

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From: bronxvikki@aol.com [mailto:bronxvikki@aol.com]
Sent: Friday, August 03, 2012 1:04 PM
To: Edgehouse, Lisa
Subject: Fwd: FMLA - 7/27/2012

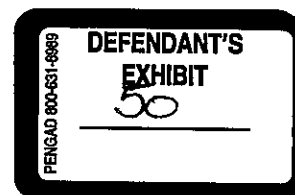
Lisa, please forward to Kara Ladaika, I tried to send several times and it was returned undeliverable. I also

Thanks.

Sent from my HTC smartphone on the Now Network from Sprint!

----- Forwarded message -----
From: bronxvikki@aol.com
To: <Bronxvikki@aol.com>, <kara.ladaika@uhhospitals.org>, <kathy.springer@uhhospitals.org>
Subject: FMLA - 7/27/2012
Date: Fri, Aug 3, 2012 12:47 pm

Hi Kara,



VJ000206

RE: YMLA - 11/21/2012

Here is the FMLA, for some reason the first one was undeliverable.

Thanks.

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Springer, Kathy

From: bronxvikki@aol.com
Sent: Monday, August 20, 2012 2:51 PM
To: Springer, Kathy
Subject: Re: Information needed
Attachments: Dr._Dutton0001.pdf

Attached is my return to work as it relates to my fitness for duty. Dr. Dutton does not wish to communicate with anyone.

I have complied with EAP fitness for duty requests, I still have not received any reports regarding my tests. Again this was all initiated because I was sleep at my desk while on my break which I explained to Christina Morrison.

I am appalled that I had to be subjected to a drug test, alcohol screening and a psych evaluation because of this.

I also believe this is because I have explain to my managers that I am not comfortable completing the Medicare 855I applications as they have instructed which is not in compliance with Medicare instructions.

I have also received a letter that I am on unpaid administrative leave.

-----Original Message-----

From: Springer, Kathy <Kathy.Springer@UHhospitals.org>
To: bronxvikki <bronxvikki@aol.com>
Sent: Wed, Aug 15, 2012 5:52 pm
Subject: Information needed

Vikki,

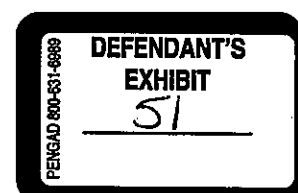
Attached is a HIPAA compliant authorization for the release of your medical records. Please complete the form and return to my attention.

As we have discussed previously, in order to complete the fitness for duty evaluation process, I need to communicate with your personal physician/psychiatrist. The purpose of my communication is not to obtain specifics regarding your treatment, but to provide the physician with your EAP evaluation/information so he or she can make a recommendation regarding your return to work, and so I can seek clarification and discuss any questions that may arise with a return to work. This communication is essential, and can take place in your presence, if that is your preference. Please complete the attached consent form.

In your prior email, you noted that your physician indicated a return to work date as September 4, 2012. I have not received the referenced return to work as it relates to your fitness for duty.

Please contact me if you should have any questions.

Kathy Fussell Springer, LISW-S, LICDC
Employee Assistance Counselor
University Hospitals Case Medical Center
11100 Euclid Avenue
Mail Stop: 6035B
Cleveland, Ohio 44106
216-286-9985 phone
216-983-3038 fax pager 216-464-8410 (38332)
email kathy.springer@UHhospitals.org



8/21/2012

UHCMC-Johnson 1003

— VJ000080
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8/21/2012

UHCMC-Johnson 1004

VJ000081
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University Hospitals

**EMPLOYEE'S HEALTH CONDITION
CERTIFICATION OF PHYSICIAN OR PRACTITIONER
Family and Medical Leave Act (FMLA) / UH Medical Leave of Absence**

TO BE COMPLETED BY EMPLOYEE

Employee's Name (print): JOHNSON VICTORIA D ☐ MD
Last First M.I.

3646 LYNNFIELD ROAD SHAKER HILLS OHIO 44122
Address City/State/Zip Code

Phone: 216 780 1009 Last 4 digits of Social Security#: 8450 Date of Birth: 1/15/1958

Department: PROVIDER ENROLLMENT Manager: SHERYL JOHNSON Manager's Office #: 692.1144

I hereby authorize University Hospitals Corporate Health Staff to contact the physician/practitioner for clarification and/or to determine authenticity of this form.

Employee Signature: Victoria Johnson Date: 8/7/2012

If this form is incomplete it may be returned to the employee to have their physician/practitioner complete.

To be completed by Physician/Practitioner regarding the Employee's own illness

☒ Date first seen for "current" condition 8/4/12 Date Leave to start: 8/4/12 (CONTINUING)

☒ Reason for Leave: MAJOR DEPRESSION

☐ Regimen of Treatment:

☒ Prescribed Medication(s): TITRATING ZOLOFT

☒ Referral to Specialist: (Name & Specialty) EDWARD DUTTON (Appt Date) 8/4/12

☐ Surgery: (Date) / / (Procedure)

☐ Inpatient Stay: (Date Admitted) / / (Date Discharged) / /

☐ Other (i.e. PT, Chemo, Radiation)

If pregnancy: Expected Date of Delivery: / /

If FMLA to start before expected delivery date, what is the first date of Leave? / /

Reason for early Leave:

☒ Employee is unable to perform his/her job and must remain off work until: 9/4/12

Signature of Physician/Practitioner: Edward N. Dutton M.D. Date: 8/4/12

Print Name: Edward N. Dutton, M.D. 216) 991-8444

Field of Specialization: PSYCHIATRY 3461 Warrensville Center Rd. 216) 991-9114

Address: Shaker Heights, OH 44122

Upon completion please check the entity where you are employed and fax this form to:

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> Bedford Medical Center | <input type="checkbox"/> Richmond Medical Center | <input type="checkbox"/> UH Case Medical Center | <input type="checkbox"/> Home Care Services |
| <input type="checkbox"/> Conneaut Medical Center | <input type="checkbox"/> UHPS/UHMSO | <input type="checkbox"/> UH Corporate Office | Donna Schott, RN |
| <input type="checkbox"/> Geauga Medical Center | <input checked="" type="checkbox"/> UHMG/UHMP/UPCP | <input type="checkbox"/> Seldman Cancer Center | Fax (216) 201-4072 |
| <input type="checkbox"/> Geneva Medical Center | | Lisa Edgehouse, RN | Pl. (216) 765-2797 |
| | | Fax (216) 201-4096 | <input type="checkbox"/> Ahuja Medical Center |
| | | Ph. (216) 844-8583 | Donna Gigliotti, RN |
| | | | Fax (216) 201-5051 |
| | | | Ph. (216) 593-1371 |

Kara Ladalka, RN
 Fax (216) 201-4095
 Ph. (216) 844-6088

R1639 (8/12)
 DOL: WH 380-E

REDACTED - ATTORNEY-CLIENT PRIVILEGE



From: bronxvikki@aol.com [mailto:bronxvikki@aol.com]
Sent: Tuesday, August 21, 2012 8:45 AM
To: Rogers, Deborah D
Subject: Re: SHORT TERM DISABILITY PAPERWORK

I left the office around 10:30 to go to my doctor's office. Worked 3+ hours that day.

Sent from my HTC smartphone on the Now Network from Sprint!

----- Reply message -----

From: "Rogers, Deborah D" <Deborah.Rogers@Ufhhospitals.org>
To: <bronxvikki@aol.com>
Subject: SHORT TERM DISABILITY PAPERWORK
Date: Mon, Aug 20, 2012 9:42 am

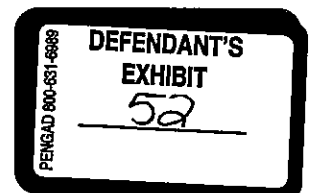
Unfortunately we did not receive the required information in time to process your claim for this payroll period.

Upon approval of your claim your benefits will be reflected in your next payroll check on August 30th.

There seems to be a discrepancy as to your first date of disability ~ was your first date of absence July 26th or July 27th?

Thank you,
Deb

08/23/2012



Debbie Rogers

Executive Secretary to Jay Waters
Vice President Corporate Risk Management
Short Term Disability Claims Examiner
University Hospitals Management Services Center
3605 Warrensville Center Road, MSC9120
Shaker Heights, OH 44122-5203
T 216-767-8531 F 216-201-4636
Deborah.Rogers@UHhospitals.org

From: bronxvikki@aol.com [mailto:bronxvikki@aol.com]
Sent: Sunday, August 19, 2012 7:14 AM
To: Rogers, Deborah D
Subject: Re: SHORT TERM DISABILITY PAPERWORK

Hi Deborah.

I completed and faxed my claim form back in time to be processed this pay period, however I just reviewed my pay voucher for pay period ending August 11, 2012, and noticed that my claim was not processed. Please explain.

Thanks

Victoria Johnson

Sent from my HTC smartphone on the Now Network from Sprint!

----- Reply message -----

From: "Rogers, Deborah D" <Deborah.Rogers@UHhospitals.org>
To: <bronxvikki@aol.com>
Subject: SHORT TERM DISABILITY PAPERWORK
Date: Thu, Aug 9, 2012 3:24 pm

Vikki:

Can't do anything with this claim as the claim form is not completed.

I need you to fill out the bottom portion please?

Thanks,
Deb

Debbie Rogers

Executive Secretary to Jay Waters
Vice President Corporate Risk Management
Short Term Disability Claims Examiner
University Hospitals Management Services Center
3605 Warrensville Center Road, MSC9120

08/23/2012

Shaker Heights, OH 44122-5203
T 216-767-8531 F 216-201-4636
Deborah.Rogers@UHHospitals.org

From: bronxvikki@aol.com [mailto:bronxvikki@aol.com]
Sent: Thursday, August 09, 2012 3:22 PM
To: Rogers, Deborah D
Subject: SHORT TERM DISABILITY PAPERWORK

PLEASE CALL OR EMAIL ME IF YOU HAVE ANY QUESTIONS.

THANKS.

216-780-1009
VICTORIA JOHNSON

Visit us at www.UHHospitals.org.

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08/23/2012

UHPS-JOHNSON 1527



Thursday, August 30, 2012

Victoria Johnson
3646 Lynnfield Road
Shaker Heights, Ohio 44122

Dear Ms. Johnson:

I am writing to advise you that we are aware that you are no longer under the care of Dr. Edward Dutton as of August 21, 2012. As you are aware, Dr. Dutton is the provider who completed the Certification of Physician for you to remain off work.

We require that you to provide to us additional documentation from the healthcare provider to Corporate Health Services documenting the need for additional time off and the expected date of return. I have attached a new Certificate of Physician for you to review and have completed by your physician or practitioner. This Certification of Physician is due to Corporate Health Services no later than September 7th, 2012. If documentation is not provided by this date, your FMLA will end as of 8/21/12.

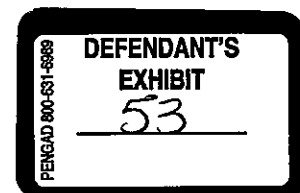
In addition, when you are cleared to return to work by your healthcare provider you will need to forward the enclosed Return to Work Authorization form to Corporate Health. Your manager will not be able to return you to work until the form is provided.

If you have any questions please contact HR Services at 1-877-HR1-Place (1-877-471-7522) or your Care Advocate, Kara Ladaika RN (216-844-6088).

Sincerely,

Kara Ladaika RN
UH Corporate Health

CC: Christina Morrison, HR
Chip Fienga, HR Service Center





October 1, 2012

Victoria Johnson
3646 Lynnfield Road
Shaker Heights, Ohio 44122

Sent via Certified Mail and Regular US Mail

Dear Victoria,

This letter serves as formal notification of our expectation that you return to work by Monday, October 8, 2012. As you are aware, you were out on a leave of absence that ended on August 21, 2012.

To date, we have not heard from you nor have you provided the additional documents for certification that we requested. As such, since August 21, 2012, there is no basis for continued leave. We have reached out to you several times and have had no response from you, and our certified letters have been returned, unclaimed by you.

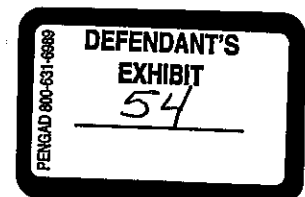
We expect that you will return to work on Monday, October 8, 2012. If you do not report for work on that date, your employment will be terminated.

If you have any questions, please contact me directly at 216-383-6759.

Sincerely,

A handwritten signature in black ink, appearing to read 'Christina Morrison', written over a horizontal line.

Christina Morrison
Sr. Generalist Human Resources
UHPS
24701 Euclid Avenue
Euclid, Ohio 44117





October 8, 2012

Via Hand Delivery and Discussion

Victoria,

Good morning.

Your UH Corporate Health Advocate sent you communication via Certified Mail indicating what was needed for you to be appropriately returned to work. These communications, along with others I sent, were returned to us unclaimed by you. The August 14, 2012 letter from me did not supersede your request for FMLA.

When you return to work Monday, October 8, 2012, you will be expected to perform your job duties and responsibilities as directed by your supervisors. The concerns you brought forward regarding the provider applications were investigated and addressed.

All UH employees can expect to work in a hostile free work environment. UH policy HR 20 Antiharrassment and Non-Discrimination, states that UH is committed to providing a work environment that is free from all forms of discrimination including conduct that can be considered harassing, coercive or disruptive, including sexual harassment.

You will need to request a copy of your screening results through UH Corporate Health Department.

UH has standards for job performance and any employee found violating these standards, which includes sleeping on duty, will be subject to corrective action. There will be no company wide email distribution referencing resting at your desk.

As you are aware, your allegations regarding another employee's behavior last February 2012 were completely investigated and appropriate action was taken. We do not communicate actions taken in reference to other employees.

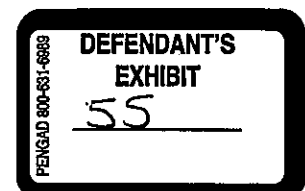
As I've communicated to you multiple times, you have no corrective actions in our system or on file, and if you had any, you would have been given a copy. Again, there are no corrective actions to give you copies.

You will be treated as all other UH employees are treated and will be held to all UH policies and expectations of your job. As mentioned above, UH HR policy HR 20 addresses any concerns you may have regarding retaliation or harassment.

I look forward to discussing this communication with you today.

Sincerely,

Christina Morrison
Sr. Generalist HR UHPS



FILE COPY



October 8, 2012

Victoria Johnson
3646 Lynnfield Road
Shaker Heights, Ohio 44122

Sent via Certified and Regular US Mail

Dear Victoria:

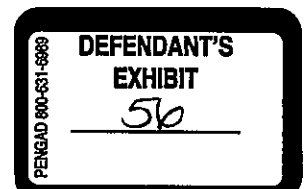
This letter confirms the result of your meeting with Angelique Sunagel, Director, Human Resources, University Hospitals Physician Services (UHPS) and me this morning, October 8, 2012, regarding your return to work.

As you aware on October 1, 2012, we sent you letter as formal notification that you were to return to work effective October 8, 2012, as your leave of absence ended August 21, 2012, and there was no basis for your continued absence.

During our meeting this morning, we reviewed and discussed the concerns you raised in the October 5, 2012 letter that was emailed to us. Additionally, we informed you that you would be expected to perform all your job duties and responsibilities as a Provider Enrollment Specialist, including but not limited to appropriately completing Medicare and Medicaid and other provider applications. As you know, this is an essential function of the job of Provider Enrollment Specialist.

You informed us that you would not complete the provider applications as instructed, and if instructed to do so, you would refuse to do them. As you are aware, your concerns previously brought forth relating to this matter, were reviewed and investigated. A response was sent to you from Cheryl Wahl, Chief Compliance Officer, with a statement that the Departmental practices are (and were) appropriate. Therefore, we expect you to perform your job duties as directed. Ms. Sunagel asked you if you were refusing to perform an essential function of your job and you said "Yes."

Ms. Sunagel explained to you that we would give you 24 hours to reconsider, and that if you continued to refuse to perform your job duties, you would be terminated effective immediately. You stated you did not need 24 hours, that you were not going to complete the provider applications. Ms. Sunagel reiterated that we would give you 24 hours to reconsider, but you again stated that you did not need 24 hours. As such, your employment was terminated effective October 8, 2012, for refusal to perform essential functions of your job.



10/18/12

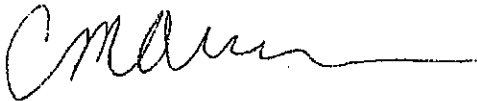
It has also been brought to our attention that on Friday, October 5, 2012, you faxed your letter to a non-secure fax machine. Your letter included confidential information as well as your own protected health information (PHI). Please be advised that if you wish to send any future communications to University Hospitals, you must contact me before doing so to ensure that any information that you wish to send is sent and received appropriately.

Enclosed please find a copy of your discharge Corrective Action as well as a copy of UH Corrective Action Policy HR 72 UH Complaint Resolution Policy HR-83.

You will receive under separate cover, information regarding your benefits.

Should you have any questions, please call me at 216.383.6759.

Sincerely,



Christina Morrison
Sr. Generalist Human Resources
UHPS

frmNotes		
NOTES	Date Created	OPID
I again called the contact and explained that per the Ohio license Website, the provider's Ohio license is pending. She stated that she overlooked that information and asked that the application be withdrawn. She will again submit the app once the provider is licensed in Ohio. Kac 6/21/12 @ 4:05	6/21/2012 4:03:20 PM	kp56
Per the ohio website, the provider's medical license is pending.	6/21/2012 4:00:16 PM	kp56
I CALLED 216-383-6614 AND SPOKE TO VICTORIA. SHE VERIFIED THAT THE PROVIDER CAN BE REACHED AT THIS NUMBER. KAC 6/21/12 @ 3:51 PM	6/21/2012 3:50:52 PM	kp56
8551 - L&T ID: 20120618000771 855RW - L&T ID: 20120618000793	6/18/2012 8:34:38 AM	le27
All legal names were searched and yielded no findings against the EPLS and MED Reports. All Foreign born providers were searched and yielded no findings against the SDN Reports.	6/18/2012 8:31:33 AM	le27

